nd this form, together with applicable fee(s), to: Mail

PART B - FEE(S) TRANSMITTAL

Mail Stop ISSUE FEE Commissioner for Patents

MADE			or Fa <u>x</u>	P.O. Box 14: Alexandria, (571) 273-28	Virginia 22313	1450	-	
INSTRUCTIONS: This for appropriate. All further con indicated unless corrected be maintenance fee notification	m should be used for trans respondence including the F below or directed otherwise	mitting the ISSU atent, advance or in Block 1, by (a		ICATION FEE (if n of maintenance correspondence ad	required). Blocks fees will be mailed dress; and/or (b) in	l through 5 sl to the current dicating a sepa	hould be completed correspondence add rate "FEE ADDRES	where ress as SS" for
CURRENT CORRESPONDENCE	Note: A certificate of mailing c.n only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must							
43446 75	have its own cert	tificate of mailing or	transmission.					
CASTELLANO I 2121 K STREET, I SUITE 800	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
WASHINGTON, D	JC 20037			(Brian J		n (Depositor	
			•		TRANS	M	in (Si	ignature)
·					Sept.	200	5	(Date)
			PID CT MANAGED BILLS	NEW ID	ATTORNEY	· <i>,</i>	CONFIRMATION	
APPLICATION NO.			FIRST NAMED INVENTOR			DOCKET NO.		<u>NO.</u>
10/762,533	01/23/2004		David C. Pau		GM!,.0	2U.¢00	5342	
TITLE OF INVENTION: SI	PINE STABILIZATION SY	STEM			f			
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APPLN, TYPE	SMALL ENTITY	ISSUE F	EE I	PUBLICATION FEE	TOTAL FI	EE(S) DUE	DATE DUE	
nonprovisional	YES	\$700	1	\$300		000	10/07/2005	
EXAMINER ART U		ur (T CLASS-SUBCLASS					
PHILOGENE, PEDRO 373:				606-061000				
L Change of correspondence	e address or indication of "Fe	e Address" (37	2. For printing o	n the patent front p	age, list	Castellane	Malm Ferrario & I	Buck DLIC
CFR·1.363). Change of correspond Address form PTO/SB/12	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,							
"Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required.	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON	THE PATENT (prin	t or type)				
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	low, no assignee of this form is NO	data will appear on T a substitute for file	the patent. If an ing an assignment.	assignee is identifie	d below, the d	locument has been f	iled for
(A) NAME OF ASSIGN	EE	(I	3) RESIDENCE: (C	ITY and STATE O	r countros m	BIZUNE2 00(000004 503120	10762533
Globus N	Medical, Inc.		Phoenix	ville, PA	02 FC:1504	700.0 300.0	00 DA O DA	
					Corporation or t	other private gr	oup entity - Cove	- Innicia
4a. The following fee(s) are	enclosed:	41	b. Payment of Fee(s)	o: amount of the fee(s	a) is enclosed			
					O-2038 is attached.			
Advance Order - # of	The Director is	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to posit Account Number 50-3120 (enclose an extra copy of this form).						
a. Applicant claims S	(from status indicated above	37 CFR 1.27.			SMALL ENTITY 8			
The Director of the USPTO NOTE: The Issue Fee and B interest as shown by the	is requested to apply the Issue the state of the United States Property of the United States	thee and Publicated not be accepted and Trademark	tion Fee (if any) or d from anyone other office.	to re-apply any pre than the applicant	eviously paid issue for ; a registered attorne	e to the applic y or agent; or t	ation identified abov he assignee or other	e. party in
Authorized Signature		Date	September					
Typed or printed name Brian J. Malro				Registration No. 44,895				
This collection of informatic an application. Confidential submitting the completed at this form and/or suggestions Box 1450, Alexandria, Virg	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. pplication form to the USPT s for reducing this burden, slinia 22313-1450. DO NOT	11. The informati 122 and 37 CFR O. Time will vary lould be sent to the SEND FEES OR	on is required to obt 1.14. This collection depending upon the Chief Information COMPLETED FOR	ain or retain a bene n is estimated to ta e individual case. Officer, U.S. Pate MS TO THIS AD	fit by the public whi ke 12 minutes to co Any comments on the and Trademark O DRESS. SEND 'O':	ch is to file (an implete, including the amount of ti office, U.S. Der Commissioner	nd by the USPTO to a gathering, prepartime you require to continuent of Commertor Patents, P.O. Bo	process) ing, and omplete ce, P.O. ox 1450,

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